

Under Secretary of Comit. arce for Intellectual Property and Director of the United States Patent and Trademark Office

2004-1706

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Paper No: 20

Alexandria, Virginia 22313-1450

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U.S. PATENT AND TRADEMARK OFFICE BOARD OF PATENT APPEALS AND INTERFERENCES

Oliff & Berridge, PLC P.O. Box 19928 Alexandria, VA 22320 Appeal No:
Appellant:
Application No:
Hearing Room:
Hearing Docket:
Hearing Date:

09/266,922
A
B
Tuesday, February 08, 2005
9:00 AM
MADISON BUILDING (EAST WING)
600 Dulany Street

Alexandria, Virginia 22313∋1450

NOTICE OF HEARING CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS

Hearing Time:

Location:

Your attention is directed to 37 CFR § 41.47.

The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up.

The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced.

CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED.

This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if facsimile is not available.

Failure to file this form within this time period will be construed as a waiver of the request for oral hearing.

37 CFR § 1.136(a) does not apply.

By order of the Board of Patent Appeals and Interferences

| (571) 273-0299 USPTO Central Fax No. (703) 872-9306 |
|---|
| Clerk of the Board (571) 272-9797 |

counsel:

RPAI HEARINGS FAX No:

BPAI Mailing Address:

BOARD OF PATENT APPEALS AND INTERFERENCES UNITED PATENT AND TRADEMARK OFFICE

P.O. BOX 1450

ALEXANDRIA, VIRGINIA 22313-1450

| In all communications relating to this appeal, | please identify the appeal by its number. |
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| CHECK ONE: | HEAI | RING ATTENDAL | NCE CONFIRMED | |
|---------------------------------------|---------------------------|---------------|------------------|--|
| | HEARING ATTENDANCE WAIVED | | | |
| | | | , | |
| Signature of Attorney/Agent/Appellant | | Date | Registration No. | |
| Names of other visitors expe | ected to accompany | | | |